

AMENDMENTS TO THE CLAIMS

This listing of claims will replace all prior versions, and listings, of claims in the application:

In the claims

1. (Previously Presented): A method for treating a lung comprising:
creating a fluid channel through a wall of an airway, where the airway is outside of the lung, such that the channel extends through a visceral and parietal pleura and into lung parenchyma to fluidly connect the lung parenchyma with the airway such that air may pass directly from the lung parenchyma to the airway and outside of the body.
2. (Cancelled)
3. (Original): The method of claim 2 wherein said channels are created using a radio frequency energy delivering device.
4. (Previously Presented): The method of claim 2 wherein said lung and airway are fluidly connected with a conduit having a passageway for air to flow through.
5. (Previously Presented): The method of claim 4 wherein said conduit comprises a first portion, second portion and a center section between said first portion and said second portion, said first portion and said second portion being adapted to secure said conduit to said lung and airway.
6. (Original): The method of claim 5 wherein each of said first portion and second portion of said conduit comprises a plurality of extension members which are deflectable such that when said conduit is deployed, said extension members from said first portion substantially oppose said extension members from said second portion such that tissue may be sandwiched therebetween.
7. (Original): The method of claim 4 further comprising providing a sealant to an exterior surface of the conduit to prevent side flow of air around the conduit.
8. (Original): The method of claim 7 wherein said sealant comprises talc.

9. (Original): The method of claim 7 wherein said sealant is fibrin glue.
10. (Original): The method of claim 7 wherein said sealant comprises cyanoacrylate.
11. (Original): The method of claim 5 wherein said center section has a length in the range of 0.5 to 50 mm.
12. (Original): The method of claim 11 wherein the center section has a length of 1 mm.
13. (Original): The method of claim 4 wherein the conduit includes a biocompatible coating.
14. (Original): The method of claim 13 wherein said coating promotes wound healing.
15. (Original): The method of claim 4 further comprising deploying at least one intrapleural conduit to maintain a channel surgically created in an intrapleural airway.
16. (Original): The method of claim 6 wherein the extension members form right angles when deployed.
17. (Original): The method of claim 6 wherein the extension members form angles between 90 and 135 degrees when deployed.
18. (Previously Presented): The method of claim 2 further comprising detecting blood vessels prior to said step of creating channels in said airway wall and lung wall.
19. (Original): The method of claim 4 wherein said conduit comprises at least one visualization feature on an exterior surface of said conduit.
20. (Previously Presented): The method of claim 2 wherein said creating the channel through the airway wall is performed prior to said creating the channel through said lung wall.

21. (Previously Presented): The method of claim 2 further comprising fixing said airway wall to said lung wall.

22. (Previously Presented): The method of claim 21 wherein said creating a channel through said airway wall and said lung wall is performed subsequent to said fixing said airway wall to said lung wall.

23. (Original): The method of claim 22 wherein said lung wall is the visceral pleura.

24. – 43. (Cancelled)

44. (Withdrawn): A method for treating a lung comprising:
creating a fluid channel to fluidly connect the lung with a portion of an airway that is outside the pleural cavity, such that the fluid channel extends through a visceral and parietal pleura and into lung parenchyma such that air may pass directly from the lung parenchyma to the airway.

45. (Cancelled)

46. (Previously Presented): The method of claim 45 wherein said channels are created using a radio frequency energy delivering device.

47. (Withdrawn): The method of claim 45 wherein said lung and airway are fluidly connected with a conduit having a passageway for air to flow through.

48. (Withdrawn): The method of claim 47 wherein said conduit comprises a first portion, second portion and a center section between said first portion and said second portion, said first portion and said second portion being adapted to secure said conduit to said lung and airway.

49. (Withdrawn): The method of claim 48 wherein each of said first portion and second portion of said conduit comprises a plurality of extension members which are deflectable such that when said conduit is deployed, said extension members from said first portion substantially oppose said extension members from said second portion such that tissue may be sandwiched therebetween.

50. (Withdrawn): The method of claim 47 further comprising providing a sealant to an exterior surface of the conduit to prevent side flow of air around the conduit.

51. (Withdrawn): The method of claim 50 wherein said sealant comprises talc,

52. (Withdrawn): The method of claim 50 wherein said sealant is fibrin glue.

53. (Withdrawn): The method of claim 50 wherein said sealant comprises cyanoacrylate.

54. (Withdrawn): The method of claim 48 wherein said center section has a length in the range of 0.5 to 50 mm.

55. (Withdrawn): The method of claim 54 wherein the center section has a length of 1 mm.

56. (Withdrawn): The method of claim 47 wherein the conduit includes a biocompatible coating.

57. (Withdrawn): The method of claim 56 wherein said coating promotes wound healing.

58. (Withdrawn): The method of claim 47 further comprising deploying at least one intrapleural conduit to maintain a channel surgically created in an intrapleural airway.

59. (Withdrawn): The method of claim 49 wherein the extension members form right angles when deployed.

60. (Withdrawn): The method of claim 49 wherein the extension members form angles between 90 and 135 degrees when deployed.

61. (Withdrawn): The method of claim 45 further comprising detecting blood vessels prior to said step of creating channels in said airway wall and lung wall.

62. (Withdrawn): The method of claim 47 wherein said conduit comprises at least one visualization feature on an exterior surface of said conduit.

63. (Withdrawn): The method of claim 45 wherein said creating the channel through the airway wall is performed prior to said creating the channel through said lung wall.

64. (Withdrawn): The method of claim 45 further comprising fixing said airway wall to said lung wall.

65. (Withdrawn): The method of claim 64 wherein said creating a channel through said airway wall and said lung wall is performed subsequent to said fixing said airway wall to said lung wall.

66. (Withdrawn): The method of claim 65 wherein said lung wall is the visceral pleura.

67. (New): The method of claim 1, where the airway comprises an extra-pleural airway.

68. (New): The method of claim 67, where the extra-pleural airway comprises an airway selected from the trachea or mainstem bronchus.

69. (New): The method of claim 1, wherein the air may pass directly from the lung parenchyma, to the airway, through a natural respiratory opening, and outside of the body.